Department of Anesthesia & Perioperative Medicine 5-Year Strategic Plan
FY 2012-2016

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FACULTY DEVELOPMENT

Mission: Our mission is to develop academic careers, promote lifelong learning and professional development, motivate junior faculty to become leaders in academic medicine, develop skill sets for excellence in all areas, provide a support system for new faculty, support diversity, and reduce stress and burnout of individual faculty.

Vision: Our vision is that all faculty will achieve their individual full potential as members of the College of Medicine and MUSC and be rewarded for that achievement and that these achievements will result in a nationally and internationally acclaimed academic department.

Strategic Objectives:
- Develop a mentoring system that supports and encourages faculty in their development
- Provide opportunities for faculty to excel in clinical care, research, education, and administration
- Provide unique opportunities for leadership development
- Support individuals in developing the materials necessary for successful promotion

Performance metrics:
- Monitor indices of research production in conjunction with the Research Committee such as grant submissions, IRB approvals and accepted peer reviewed articles
- Monitor benchmarks of the other three areas of practice especially against previously agreed upon goals
- Track academic time granted against academic productivity
- Compare faculty promotion to the next level against time at current level

FINANCE

Mission: Our mission is to promote a transparent financial strategy in a challenging healthcare environment supportive of the mission and vision of the Department while continuing to ensure excellence.

Vision: Our vision is to develop the financial resources necessary to excel in the delivery of outstanding, cost-effective patient care while promoting excellence in education and research.

Strategic Objectives:
- Cost Containment: 1) Align faculty recruitment with anticipated cuts in reimbursement; 2) Demonstrate commitment to hospital cost containment through sensible drug and equipment use
- Improve Efficiency: 1) Continue to improve OR efficiency through first-case start time and turnover time initiatives; 2) Maximize educational goals and billing efficiency through appropriate attending, resident, and CRNA staffing
- Additional Revenue: 1) Increase hospital support of unfunded anesthesia services; 2) Maximize existing billing opportunities; 3) Expand reimbursed anesthesia services within MUSC; 4) Explore providing outside anesthesia services

“An equal opportunity employer, promoting workplace diversity”
Performance metrics:
- Monitor physician costs relative to units billed
- Utilize existing hospital performance metrics for cost containment and efficiency standards
- Analyze financial data to assess feasibility of additional services

RESEARCH

Mission: The research mission of the Department of Anesthesia and Perioperative Medicine at the Medical University of South Carolina is to pursue excellence and develop new knowledge in areas relevant to perioperative medicine and critical care by conducting clinical, translational and basic science research. We seek to better understand disease and pain mechanisms that occur during the perioperative period and severe illness and thereby identify novel and innovative therapeutic targets, technologies, and other strategies that will improve the care and outcome of patients who require perioperative, critical care, and pain treatment.

Strategy:
- Organized conceptually as an integrated center whose overall purpose is to improve perioperative and long-term outcomes following surgery and intensive care.
- Capitalize on existing areas of strength: ongoing efforts that address issues related to improving patient outcome will be expanded
- Key nascent areas will be developed
- Integrate and try to leverage with COM’s Research Strategic Plan (Genetics/Genomic Medicine, Population Science, and Public Health)

Proposed Areas of Focus:
- Novel and improved therapies for acute and chronic pain
- Molecular, cell, and genetic biology of injury, cellular stress responses, and wound healing
- Pathobiology and treatment of inflammation and blood loss
- Cell-based therapies to restore damaged organ function
- Human factors research, innovative operating room and intensive care unit design and management
- Uses of medical simulation to improve patient safety and clinician education

Key Programmatic Elements:
- “Protected time”, project funds (starter-type grants)
  - Patient enrollment, data collection, IRB, funds management assistance by dedicated support staff
- Statistical consultation and collaboration
- Formalized, transparent application and award process
- Monthly research conference
- Establish research “pods” for mentoring and oversight

Benchmarks:
- Recruit 2-3 scientific investigators to lead research programs in one of the target areas
- Increase number of significant departmental research projects and number of members participating
- Functional success of the formal mentoring program and mentoring “pods”
- Increase peer-reviewed publications
- Increase extramural funding
Increase job and personal satisfaction attributed to creation of and participation in research activities

**CLINICAL CARE**

**Mission:** To provide outstanding comprehensive, patient centered perioperative clinical services that dramatically improve the quality of care and patient outcomes across the surgical continuum.

**Vision:** To be recognized as a nationally and internationally acclaimed academic department recognized for excellence and value in perioperative healthcare. In addition, we recognize that we must be able to adapt, grow, and respond to rapid and at times disruptive changes in health care if we are going to be able to carry out our mission and practice according to our expressed values. Maintaining the status quo will not be sufficient. Instead, we need to effect continuous improvement in the quality, safety, and scope of care that we provide in order to increase the importance and value of our abilities and services to our patients their families, and to the medical center.

**Objectives:** Expand our current perioperative clinical services to better manage our patients from the interval of altered physiology that begins with the onset of surgical illness and ends with the return to the baseline that was present prior to the surgical illness. Our areas of focus are four fold:

- **Improved Preoperative Evaluation and Optimization Services:**
  - Preoperative Clinic Restructuring
    - Staffing restructure, scheduled appts
  - Better Identification of Patients Requiring Preoperative Evaluation
    - Preop Roadmap
  - Standardized Recommendations and Practice Patterns
    - Preoperative labs and medication administration
    - Better adherence to practice guidelines
    - Improved communication
  - Improved inpatient preoperative evaluation

- **Improved Pain Management Services in Both Adult and Pediatric Patients:**
  - Increased number of regional anesthesia (blocks, catheters)
  - Improved responsiveness and management of current catheters
  - Create acute pain service at ART with new resident rotation
  - Consult service for chronic pain patients with acute pain issues (i.e., chronic pancreatitis)
  - Expanded management – caring for patients from catheter based management to oral pain management

- **Advanced Postoperative Management Patient Subsets:**
  - Orthopedic Joint Patients
    - Manage patient from preoperative optimization to rehab
    - Management plan to allow patient start PT the day of surgery
  - Destination Breast Reconstruction
    - Help develop standardized preoperative and intraoperative care plans
  - ENT Reconstructive Surgical Patients
    - Test group – management of patients in the postoperative period
- Improved recognition and perception of our specialty within the medical community and by our patients

- Performance Metrics:
  - Improved patient satisfaction
  - Improved surgeon satisfaction
  - Improved anesthesia satisfaction
  - Decreased costs by eliminating unnecessary testing
  - Decreased costs by decreasing procedure cancellations

**EDUCATION**

**Vision:** To be educational leaders and innovators in anesthesiology and perioperative medicine.

**Mission:** To provide students, residents, fellows, anesthesiologists, and the medical community with outstanding education in anesthesiology and perioperative medicine in order to foster the development of excellent clinicians and educators.

**Goals and Objectives:**

**Faculty**
- Develop Perioperative Medical Management Program with education in perioperative medicine and critical care
- Develop MOCA and other possible CME offerings to facilitate faculty development

**Residents/Fellows**
- Develop an automated competency-based assessment system in line with ACGME Milestones Project
- Improve ultrasound training in the perioperative setting and ICU
- Improve education in perioperative medical management
- Improve opportunities for research and education about research methodology
- Develop a “Residents as Teachers” program

**Medical Students**
- Improve and expand curriculum to aid in delivery of medical student education in all rotations. (ICU, OR, and Pain Clinic)
- Improve assessment of education for all medical student anesthesia rotations (ICU, OR, and Pain Clinic)
- Improve marketing and visibility of medical student rotations and anesthesia research opportunities
- Continued quality improvement of the medical student Anesthesia Interest Group (AIG)